



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

October 8, 2003

In re application of:

Attorney Docket
No. 200-0767

MICHAEL JOHN CULLEN and
RALPH WAYNE CUNNINGHAM

Serial No.: 09/669,443

Group Art Unit: 3681

Filed : September 26, 2000 Examiner: Roger L. Pang

For : VEHICLE TRAJECTORY CONTROL SYSTEM

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AMENDMENT

In response to the Office action dated September 15, 2003,
please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims
which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.

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12/11/03

RCE/3681



PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/669,443 | |
| | Filing Date | September 26, 2000 | |
| | First Named Inventor | Michael John Cullen | |
| | Art Unit | 3681 | |
| | Examiner Name | Roger L. Pang | |
| Total Number of Pages in This Submission | 14 | Attorney Docket Number | 200-0767 (FGT 321) |

| ENCLOSURES (Check all that apply) | | |
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| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Communication; Request for Continued Examination Transmittal |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | John D. Russell, Reg. No. 47,048 Kolisch Hartwell P.C. |
| Signature | |
| Date | November 20, 2003 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
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| Typed or printed name | Pamela A. Knight |
| Signature | |
| Date | November 20, 2003 |

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